BEST AVAILABLE COPY

PATENT APPLICATION FEE DETERMINATION RECORD

Application or Docket Number

| Effec | tive October 1, 2 | 000 | | 09/ | 6 (|) 3 9 | 42 |
|---|--|---------------------------|---|------------------------|---------------|--------------------|--|
| CLAIMS A | S FILED - PART (Column 1) | (Column 2) | | ENTITY | | | R THAN |
| TOTAL CLAIMS | | (Osidiiii Z) | TYPE | | OR T | | L ENTITY |
| FOR 4 | NUMBER FILED | NUMBER EXTRA | BASIC | | - | RATE | FEE |
| TOTAL CHARGEABLE CLAIMS | | * | - DASIC I | EE | OR | BASIC FE | E 8€0 |
| INDEPENDENT CLAIMS | 5 minus 20= | • | X\$ 9 | = | OR | X\$18= | |
| MULTIPLE DEPENDENT CLAIM PR | 2 minus 3 = | | X40= | . | OR | X80= | |
| THE ELDER ENDERT OF AIM FR | RESENT | | +135: | | | +270= | |
| * If the difference in column 1 is less than zero, | | "0" in column 2 | TOTA | | OR | L | 1 2 / 5 |
| CLAIMS AS AMENDED - PART II | | | | <u> </u> | OR | TOTAL | 1130 |
| (Column 1) (Column 2) (Column 3) | | | OTHER THAN SMALL ENTITY OR SMALL ENTITY | | | | |
| CLAIMS REMAINING AFTER AMENDMENT Total Independent * | HIGHE NUME PREVIO PAID F | BER PRESENT USLY EXTRA | RATE | ADDI- TIONAL FEE | | RATE | ADDI- TIONAL FEE |
| Total + | Minus ** | = | X\$ 9= | | OR | X\$18= | |
| Independent + | Minus *** | ` = | X40= | | 1 1 | | |
| FIRST PRESENTATION OF MU | LTIPLE DEPENDENT | CLAIM | 740= | - | OR | X80= | <u> </u> |
| | | | +135= | | OR | +270= | |
| • | • | | TOTA ADDIT. FE | | OR , | TOTAL DDIT. FEE | |
| (Column 1) | (Colum HIGHE | | | | | à | |
| REMAINING AFTER AMENDMENT Total Independent * | NUMBI PREVIOL PAID FO | ER PRESENT JSLY EXTRA | RATE | ADDI- TIONAL FEE | | RATE | ADDI- TIONAL FEE |
| Total * N | Minus ** | = | X\$ 9= | | OR | X\$18= | _ / - - |
| FIRST PRESENTATION OF MUL | Minus +++ | = | X40= | | ر م | X80= | |
| THE SENTATION OF MOL | TIPLE DEPENDENT C | LAIM | +135= | | OR | +270= | |
| • | • | | TOTAL ADDIT. FEE | | OR 🚜 | TOTAL DDIT. FEE | |
| (Column 1) | (Column | | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, | | AL | JUII. FEE L | |
| CLAIMS REMAINING AFTER AMENDMENT Total Independent M | HIGHES NUMBE PREVIOUS PAID FO | R PRESENT SLY EXTRA | RATE | ADDI- TIONAL FEE | | RATE | ADDI- TIONAL FEE |
| Total • Mi | inus •• | = | X\$ 9= | | | X\$18= | ا ليالة |
| Independent • M | inus *** | = | X40= | | "` - | | |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM | | | | | DR _ | X80= | |
| If the entry in column 1 is less than the entry in column 2, write "0" in column 3. | | | +135= | ļ. | R | -270= | |
| If the "Highest Number Previously Paid F "If the "Highest Number Previously Paid F The "Highest Number Previously Paid Fo | or in this space is les | e than 20, enter "20." | TOTAL ADDIT. FEE | roorlate boy in | R ADI | TOTAL DIT. FEE | |